



**King County**

**Department of Development and Environmental Services**  
**Land Use Services Division**  
900 Oakesdale Avenue Southwest  
Renton, Washington 98055-1219  
206-296-6600 TTY 206-296-7217

**Binding Site Plan  
Application**

Alternate formats available  
upon request

Do not write in this box

**BINDING SITE PLAN NO:** \_\_\_\_\_

**PRE-APPLICATION NO:** \_\_\_\_\_

**APPLICATION NAME:** \_\_\_\_\_

*DO NOT WRITE ABOVE THIS LINE*

I (We), the undersigned owner(s) of property numbered opposite my (our) name(s), hereby apply for a Binding Site Permit.

STATE OF WASHINGTON COUNTY OF KING

I, \_\_\_\_\_, being duly sworn, depose and say that I am a property owner or officer of the corporation owning property shown on Parcel #1 on Assessor's map and I have familiarized myself with the rules and regulations of the Department of Development and Environmental Services with respect to preparing and filing this application and that the following statements, answers, and information submitted present the argument in behalf of this application and are in all respects true and correct to the best of my knowledge and belief.

\_\_\_\_\_  
Owner's Signature

\_\_\_\_\_  
Corporation or Company Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
Telephone

\_\_\_\_\_  
City

\_\_\_\_\_  
State

Subscribed and Sworn to me this

Day of \_\_\_\_\_, 20 \_\_\_\_\_

**NOTARY SEAL**

Notary Public in and for the

STATE OF \_\_\_\_\_

AND

RESIDING AT \_\_\_\_\_

\_\_\_\_\_  
Signature

**Check out the DDES Web site at [www.metrokc.gov/ddes](http://www.metrokc.gov/ddes)**

Other property owners included in this application must be listed below opposite a parcel number which is also shown on the Assessor's map and indicates the property owned by each applicant. Attach additional property owner names, if applicable.

Parcel	_____	Signature	_____
2	Name	City/State	_____ Zip Code _____
	_____	Telephone	_____
	Address		

Parcel	_____	Signature	_____
3	Name	City/State	_____ Zip Code _____
	_____	Telephone	_____
	Address		

State below the name, address, and phone number of person or persons to be contacted for further details.

_____	_____
Name	City/State
_____	_____
Address	Zip Code Phone

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